

**TDMS No.** 95003 - 05

**Test Type:** CHRONIC

**Route:** SKIN APPLICATION

**Species/Strain:** RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Methyl trans-styryl ketone

**CAS Number:** 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

**Lab:** SRI

F1\_R2

**C Number:** C95003

**Lock Date:** 01/29/2007

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** ALL

**Removal Date Range:** ALL

**Treatment Groups:** Include ALL

**Study Gender:** Both

**TDMSE Version:** 2.2.0

Note: Animals arranged according to days on test.

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Lab: SRI

DAY ON TEST

**FISCHER 344 RATS MALE****0 MG/KG**

ANIMAL ID

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	4	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7
6	8	3	5	7	9	0	1	3	5	5	5	5	5	6	6	6	6	6	6	6	6	7	9	0	1	1	2	2	2
8	0	7	4	3	0	1	6	9	0	3	9	9	9	3	4	1	7	7	4	3	3	8	0	1	6	9	9	9	9
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	5	3	1	2	0	2	2	3	4	3	2	2	1	3	2	0	2	1	1	3	2	5	1	4	2	5	1	0	1
7	0	6	3	0	5	3	8	8	4	4	1	4	0	7	7	9	5	1	4	2	5	1	6	2	2	2	2	2	2

males  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

Intestine Large, Cecum

Intestine Large, Colon

Intestine Large, Rectum

Intestine Small, Duodenum

Intestine Small, Ileum

Intestine Small, Jejunum

Liver

Hepatocellular Adenoma

Mesentery

Schwannoma Malignant

Oral Mucosa

Squamous Cell Carcinoma

Pancreas

Salivary Glands

Stomach, Forestomach

Stomach, Glandular

+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	I	+	+	I	+	+	+	+	+	+	+	+
+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
A	+	+	+	A	A	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	X	+	+	+	+	+	+	+
							+	+										+		+		+	+	+	X			

+	+	+	+	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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Lab: SRI

FISCHER 344 RATS MALE		DAY ON TEST	MORTALITY																				ANIMAL ID	males (cont...)		
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
		3	4	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6			
		6	8	8	3	5	7	9	0	1	3	5	5	5	6	6	6	7	7	9	0	0	1	1	2	2
		8	0	7	4	3	0	1	6	9	0	3	9	9	3	4	1	7	7	4	3	3	8	0	6	9
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	5	3	1	2	0	0	2	2	3	4	3	2	2	1	3	2	0	2	1	1	3	1	0	0
		7	0	6	3	0	5	3	8	8	4	4	4	1	0	7	7	9	5	1	4	2	5	1	6	2

NONE

## **GENITAL SYSTEM**

## **HEMATOPOIETIC SYSTEM**

## **INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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FISCHER 344 RATS MALE		DAY ON TEST	MORTALITY																				ANIMAL ID	males (cont...)		
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
		3	4	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6			
		6	8	8	3	5	7	9	0	1	3	5	5	5	6	6	6	7	7	9	0	0	1	1	2	2
		8	0	7	4	3	0	1	6	9	0	3	9	9	3	4	1	7	7	4	3	3	8	0	6	9
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	5	3	1	2	0	0	2	2	3	4	3	2	2	1	3	2	0	2	1	1	3	1	0	0
		7	0	6	3	0	5	3	8	8	4	4	4	1	0	7	7	9	5	1	4	2	5	1	6	2

## Mammary Gland Fibroadenoma

Skin  
Basal Cell Carcinoma  
Fibroma  
Fibrosarcoma  
Keratoacanthoma  
Squamous Cell Carcinoma  
Squamous Cell Papilloma

## MUSCULOSKELETAL SYSTEM

Bone  
Osteosarcoma

## Skeletal Muscle

# **NERVOUS SYSTEM**

## Brain Carcinoma, Metastatic, Pituitary Gland

## Peripheral Nerve

Spinal Cord

## **RESPIRATORY SYSTEM**

Lung  
Alveolar/Bronchiolar Adenoma

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## Lab: SRI

FISCHER 344 RATS MALE		0 MG/KG	ANIMAL ID	DAY ON TEST																		
				0 7 7 3 3 0																		
2	3	4	8	6	2	0	0	1	3	6	8	9	9	6	2	9	1	3	9	2	5	7

# ALIMENTARY SYSTEM

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Lab: SRI

NONE

## **GENITAL SYSTEM**

Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Adenoma																							1
Carcinoma																							3
Prostate	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Testes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Bilateral, Interstitial Cell, Adenoma		X			X		X	X		X	X		X	X		X		X		X			18
Interstitial Cell, Adenoma	X		X	X		X		X				X		X		X		X	X	X	X		16

## **HEMATOPOIETIC SYSTEM**

## **INTEGUMENTARY SYSTEM**

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Lab: SRI

FISCHER 344 RATS MALE		DAY ON TEST	MORTALITY																				ANIMAL ID	males (cont...)				
10 MG/KG	DAY		0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	3	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7
7	0	8	3	5	9	9	1	1	3	7	9	9	0	7	5	7	7	8	0	1	2	2	3	3	3	3	3	
2	6	0	0	4	1	1	1	3	7	9	9	0	7	0	5	7	7	1	8	6	2	9	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5	9	5	9	7	6	8	9	6	5	6	8	6	8	5	7	9	9	9	6	6	9	5	6	7	7	7	7	
1	1	9	2	3	4	5	4	2	3	9	8	3	7	5	8	6	8	8	0	3	2	5	0	1	0	0	0	

## **ALIMENTARY SYSTEM**

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FISCHER 344 RATS MALE		DAY ON TEST	ANIMAL ID																							
			077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077	077
10 MG/KG			033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033	033
7	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	7	9	9	9	9	9	0	5	5	5	5	6	7	7	7	8	8	8	8	5	6	6	7	8	8	9
7	7	9	0	5	7	0	4	6	8	7	2	4	5	0	1	2	9	7	1	6	6	3	4	6	9	
7	9	0	5	7	0	4	6	8	7	2	4	5	0	1	2	9	7	1	6	6	3	4	6	9		

#### Follicular Cell, Adenoma

1

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

Coagulating Gland		+	1
Epididymis	+	+	50
Preputial Gland	+	+	50
Adenoma			1
Carcinoma			2
Prostate	+	+	50
Adenoma	X	X	2
Seminal Vesicle	+	+	50
Testes	+	+	50
Bilateral, Interstitial Cell, Adenoma	X	X	11
Interstitial Cell, Adenoma	X	X	23

## **HEMATOPOIETIC SYSTEM**

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Lab: SRI

FISCHER 344 RATS MALE	10 MG/KG	DAY ON TEST																						
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		7	7	9	9	9	9	0	0	5	5	5	5	6	7	7	7	8	8	8	8	5	6	7
		7	9	0	5	7	0	4	4	6	8	7	2	4	5	0	1	2	9	7	1	6	6	3

**\* TOTALS**

## Spinal Cord

4

# **RESPIRATORY SYSTEM**

## **SPECIAL SENSES SYSTEM**

## **URINARY SYSTEM**

## **SYSTEMIC LESIONS**

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Lab: SRI

FISCHER 344 RATS MALE	30 MG/KG	DAY ON TEST	ANIMAL ID																				males (cont...)	
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3	4	5	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	7
6	6	3	5	5	5	5	7	9	2	3	3	3	3	4	4	4	5	5	6	6	7	8	9	0
2	7	4	4	4	4	5	5	0	6	0	2	2	3	2	4	4	7	9	7	3	5	4	4	8
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3	3	2	2	2	4	5	2	3	4	2	1	3	4	0	3	4	0	1	2	0	2	4	3	1
5	6	8	2	2	7	0	0	9	2	9	1	1	4	2	7	8	4	8	5	6	7	0	0	7

## **ALIMENTARY SYSTEM**

\* Total animals with tissue examined microscopically; Total animals with tumor

+ Tissue examined microscopically

X Lesion present

X .. Lesion present  
| Insufficient tissue

## M Missing tissue

A Autolysis precludes evaluation

**BLANK** Not examined microscopically



TDMS No. 95003 - 05

**Test Type: CHRONIC**

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## Methyl trans-styryl ketone

CAS Number: 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

DAY ON TEST																					males (cont...)
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	7
6	6	6	3	5	5	5	7	9	2	3	3	3	3	4	4	5	5	6	7	8	0
2	7	4	4	4	4	4	5	0	6	0	2	2	2	3	2	7	9	7	3	5	4
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	3	3	2	2	4	5	2	3	4	2	1	3	4	0	3	4	0	1	2	4	3
	5	6	8	2	7	0	0	9	2	9	1	1	4	2	7	8	4	8	5	6	7

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

## **HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I., Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

FISCHER 344 RATS MALE	30 MG/KG	DAY ON TEST	males (cont...)																								
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		3	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
		6	6	3	5	5	5	5	7	9	2	3	3	3	3	3	4	4	5	5	6	7	8	9	9	0	0
		2	7	4	4	4	4	4	5	0	6	0	2	2	2	3	2	4	7	9	7	3	5	0	4	4	8
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
		3	3	2	2	2	4	5	2	3	4	2	1	3	4	0	3	4	0	1	2	0	2	4	3	1	1
		5	6	8	2	2	7	0	0	9	2	9	1	1	4	2	7	8	4	8	5	6	7	0	0	7	4

Spinal Cord

+

+

+

## RESPIRATORY SYSTEM

Lung

+ +

Alveolar/Bronchiolar Adenoma

Alveolar/Bronchiolar Carcinoma

Osteosarcoma, Metastatic, Bone

X

Nose

+ +

Trachea

+ +

## SPECIAL SENSES SYSTEM

Eye

+ +

Harderian Gland

+ +

Zymbal's Gland

+

+

Carcinoma

X

X

## URINARY SYSTEM

Kidney

+ +

Renal Tubule, Adenoma, Multiple

Renal Tubule, Carcinoma

X

Urethra

+

Urinary Bladder

+ +

## SYSTEMIC LESIONS

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                              |  | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|------------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              |  | 3           | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |   |
|                              |  | 6           | 6 | 3 | 5 | 5 | 5 | 5 | 7 | 9 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 7 | 8 | 9 | 0 |   |
|                              |  | 2           | 7 | 4 | 4 | 4 | 4 | 5 | 0 | 6 | 0 | 2 | 2 | 3 | 3 | 2 | 2 | 4 | 7 | 9 | 7 | 3 | 5 | 4 | 8 |   |
| <b>FISCHER 344 RATS MALE</b> |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>30 MG/KG</b>              |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                              |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                              |  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |
|                              |  | 3           | 3 | 2 | 2 | 2 | 4 | 5 | 2 | 3 | 4 | 2 | 1 | 3 | 4 | 0 | 3 | 4 | 0 | 1 | 2 | 0 | 2 | 4 | 3 | 1 |
|                              |  | 5           | 6 | 8 | 2 | 2 | 7 | 0 | 0 | 9 | 2 | 9 | 1 | 1 | 4 | 2 | 7 | 8 | 4 | 8 | 5 | 6 | 7 | 0 | 7 | 4 |

Multiple Organ

Histiocytic Sarcoma

Leukemia Mononuclear

Mesothelioma Malignant

+ +

X X X X X X X X X X X X X X X X X X X

males  
(cont...)

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE | 30 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |
|-----------------------|----------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
|                       |          |             | 0<br>7 |        |        |
| ANIMAL ID             | 0<br>0   | 0<br>0      | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 |        |
|                       |          |             | 0<br>1 | 1<br>2 | 2<br>2 | 2<br>3 | 3<br>3 |        |
|                       |          |             | 0<br>1 | 1<br>2 | 4<br>4 | 1<br>1 | 4<br>0 | 0<br>1 | 1<br>1 | 2<br>2 | 3<br>3 | 3<br>3 | 3<br>3 | 4<br>4 | 0<br>0 |
|                       |          |             | 0<br>1 | 1<br>9 | 9<br>5 | 5<br>1 | 8<br>2 | 2<br>9 | 4<br>4 | 2<br>2 | 3<br>3 | 3<br>3 | 4<br>4 | 1<br>1 | 3<br>3 | 5<br>5 | 7<br>7 | 9<br>9 | 3<br>3 | 6<br>6 | 3<br>3 | 6<br>6 | 8<br>8 | 3<br>3 | 6<br>6 |        |        |        |

\* TOTALS

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|---|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | +  | 47 |   |
| Intestine Large, Cecum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |   |
| Intestine Large, Colon                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | 48 |    |   |
| Intestine Small, Duodenum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Intestine Small, Ileum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |   |
| Intestine Small, Jejunum               | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | +  | 45 |   |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Fibrous Histiocytoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Hepatocellular Adenoma, Multiple       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Mesentery                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 7 |
| Pancreas                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |   |
| Acinus, Carcinoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | + | +  | 48 |   |
| Schwannoma Malignant, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Stomach, Forestomach                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Stomach, Glandular                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Tongue                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 4 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE   | 30 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |   |
|-------------------------|----------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|---|
|                         |          |             | 0<br>7 |        |          |   |
|                         |          | ANIMAL ID   | 0<br>0   |   |
| Squamous Cell Carcinoma |          |             | X X    |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2 |

## CARDIOVASCULAR SYSTEM

Heart

+ 50

## ENDOCRINE SYSTEM

Adrenal Cortex  
Adenoma+ 50  
1Adrenal Medulla  
Pheochromocytoma Benign  
Pheochromocytoma Benign, Multiple  
Pheochromocytoma Malignant+ 50  
10  
4  
1Islets, Pancreatic  
Adenoma  
Carcinoma+ 49  
7  
2

Parathyroid Gland

+ 47

Pituitary Gland  
Pars Distalis, Adenoma  
Pars Distalis, Adenoma, Multiple  
Pars Distalis, Carcinoma+ 50  
30  
2  
1Thyroid Gland  
C-cell, Adenoma  
C-cell, Carcinoma  
Follicular Cell, Adenoma  
Follicular Cell, Carcinoma+ 43  
6  
1  
1  
1

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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TDMS No. 95003 - 05

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Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE | 30 MG/KG | ANIMAL ID | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |          |
|-----------------------|----------|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|                       |          |           | 0<br>7<br>1<br>0      | 0<br>7<br>1<br>6      | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      |                       |                       |          |
|                       |          |           | 0<br>0<br>1<br>1<br>0 | 0<br>0<br>1<br>2<br>1 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>8<br>2 | 0<br>0<br>1<br>9<br>2 | 0<br>0<br>1<br>4<br>2 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>3<br>5 | 0<br>0<br>1<br>7<br>9 | 0<br>0<br>1<br>3<br>6 | 0<br>0<br>1<br>6<br>3 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>3 | * TOTALS |

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Epididymis                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Preputial Gland                       | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Bilateral, Interstitial Cell, Adenoma | X | X |   |   |   | X | X | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 13 |
| Interstitial Cell, Adenoma            | X | X | X | X |   |   |   |   |   |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 19 |    |

## HEMATOPOIETIC SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|----|
| Bone Marrow                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |
| Lymph Node  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 21 |
| Mediastinal, Carcinoma, Metastatic, Pancreas      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |
| Mediastinal, Carcinoma, Metastatic, Thyroid Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |
| Mediastinal, Hemangiosarcoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |
| Lymph Node, Mandibular                            | M | M | M | M | M | + | M | + | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 3  |  |    |
| Lymph Node, Mesenteric                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |
| Carcinoma, Metastatic, Pancreas                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|  |  | DAY ON TEST | 0<br>7 |          | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |  | ANIMAL ID   | 1<br>0 | 1<br>6 | 2<br>4 | 2<br>9 | 2<br>9 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>1 | * TOTALS |
| FISCHER 344 RATS MALE                  |  |             | 0<br>0 |          |
| 30 MG/KG                               |  |             | 0<br>0 |          |
| Spleen                                 |  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Thymus                                 |  |             | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | I      | +      | I      | +      | +      | +      | +      | +      | 46     |          |
| Thymoma Benign                         |  |             |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      |          |
| <b>INTEGUMENTARY SYSTEM</b>            |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Mammary Gland                          |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 48       |
| Carcinoma                              |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Fibroadenoma                           |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Skin                                   |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 50       |
| Fibroma                                |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 7        |
| Fibrous Histiocytoma                   |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |
| Keratoacanthoma                        |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 5        |
| Keratoacanthoma, Multiple              |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |
| Schwannoma Malignant                   |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Sebaceous Gland, Adenoma               |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>          |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Bone                                   |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 50       |
| Osteosarcoma                           |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Skeletal Muscle                        |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |
| <b>NERVOUS SYSTEM</b>                  |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Brain                                  |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 50       |
| Carcinoma, Metastatic, Pituitary Gland |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Peripheral Nerve                       |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 4        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                       | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|-----------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                       |             | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
| FISCHER 344 RATS MALE | ANIMAL ID   | 1 | 1 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |   |
|                       |             | 0 | 6 | 4 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 30 MG/KG              |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>* TOTALS</b>       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|             |   |   |
|-------------|---|---|
| Spinal Cord | + | 4 |
|-------------|---|---|

**RESPIRATORY SYSTEM**

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Alveolar/Bronchiolar Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Osteosarcoma, Metastatic, Bone |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

Nose

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

Trachea

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |

**URINARY SYSTEM**

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Kidney                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Renal Tubule, Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Renal Tubule, Carcinoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Urethra                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Urinary Bladder                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

**SYSTEMIC LESIONS**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE  | 30 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |   |
|------------------------|----------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----|---|
|                        |          |             | 0<br>7 |        |          |    |   |
|                        |          | ANIMAL ID   | 0<br>0 |          |    |   |
| Multiple Organ         |          |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |   |
| Histiocytic Sarcoma    |          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |        |          | 2  |   |
| Leukemia Mononuclear   |          |             | X      | X      |        |        |        |        |        |        |        |        |        |        |        |        | X      | X      |        |        |        |        |        |        |        |        |          | 15 |   |
| Mesothelioma Malignant |          |             | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

**Test Type: CHRONIC**

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## Methyl trans-styryl ketone

**CAS Number:** 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

DAY ON TEST

**FISCHER 344 RATS MALE****90 MG/KG**

ANIMAL ID

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 4 | 6 | 2 | 6 | 6 | 3 | 3 | 3 | 5 | 5 | 5 | 6 | 6 | 7 | 9 | 0 | 4 | 4 | 8 | 3 | 6 | 9 | 2 | 2 | 2 | 2 | 2 | 2 |
| 9 | 8 | 2 | 2 | 9 | 2 | 2 | 3 | 7 | 8 | 9 | 7 | 7 | 0 | 4 | 4 | 8 | 3 | 6 | 9 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 5 | 9 | 9 | 5 | 8 | 7 | 8 | 6 | 8 | 7 | 0 | 0 | 8 | 8 | 8 | 9 | 8 | 8 | 5 | 7 | 9 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| 7 | 9 | 4 | 6 | 2 | 2 | 1 | 2 | 3 | 0 | 0 | 7 | 9 | 4 | 0 | 5 | 8 | 4 | 9 | 1 | 1 | 3 | 4 | 7 | 9 | 1 | 1 | 1 |

**males  
(cont...)**

C-cell, Carcinoma

Follicular Cell, Adenoma

Follicular Cell, Carcinoma

**GENERAL BODY SYSTEM**

Tissue NOS

Chemodectoma Benign

+

X

**GENITAL SYSTEM**

Coagulating Gland

+ +

Epididymis

+ +

Preputial Gland

Adenoma

Carcinoma

+ +

Prostate

Adenoma

+ +

Seminal Vesicle

+ +

Testes

Bilateral, Interstitial Cell, Adenoma

Interstitial Cell, Adenoma

+ +

X X

**HEMATOPOIETIC SYSTEM**

Bone Marrow

+ +

Lymph Node

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

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Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

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Lab: SRI

|                       |          | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |
|-----------------------|----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|
| FISCHER 344 RATS MALE | 90 MG/KG | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |
|                       |          | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                    |
|                       |          | 4           | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |                    |
|                       |          | 4           | 6 | 2 | 6 | 6 | 3 | 3 | 3 | 5 | 5 | 6 | 6 | 7 | 9 | 0 | 4 | 4 | 8 | 1 | 2 |                    |
|                       |          | 9           | 8 | 2 | 2 | 9 | 2 | 2 | 3 | 7 | 8 | 9 | 7 | 7 | 0 | 4 | 4 | 8 | 3 | 6 | 9 |                    |
|                       |          | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|                       |          | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|                       |          | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                    |
|                       |          | 5           | 9 | 9 | 5 | 8 | 7 | 8 | 6 | 8 | 7 | 0 | 0 | 8 | 8 | 9 | 8 | 8 | 5 | 7 | 9 |                    |
|                       |          | 7           | 9 | 4 | 6 | 2 | 2 | 1 | 2 | 3 | 0 | 0 | 7 | 9 | 4 | 0 | 5 | 8 | 4 | 9 | 1 |                    |

Lymph Node, Mandibular

Lymph Node, Mesenteric

Spleen

Thymus

Carcinoma, Metastatic, Thyroid Gland

Thymoma Benign

## INTEGUMENTARY SYSTEM

Mammary Gland

Adenoma

Fibroadenoma

Skin

Basal Cell Adenoma

Fibroma

Keratoacanthoma

Schwannoma Malignant

Squamous Cell Papilloma

Trichoepithelioma

Sebaceous Gland, Adenoma

## MUSCULOSKELETAL SYSTEM

Bone

Osteosarcoma

Skeletal Muscle

M M M M M M M M M M M M M M + + + + M M M M M M M M M

+ +

+ +

+ +

+ +

X

+ +

X X

X

X

X

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

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## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

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Lab: SRI

|                       |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |  |
|-----------------------|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|--|
| FISCHER 344 RATS MALE |   | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |  |
| 90 MG/KG              |   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |  |
| 0                     | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | males<br>(cont...) |  |
| 4                     | 4 | 5           | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                    |  |
| 4                     | 6 | 2           | 6 | 6 | 3 | 3 | 3 | 5 | 5 | 5 | 6 | 6 | 7 | 9 | 0 | 4 | 4 | 8 | 3 | 6 | 2 | 2 | 2 | 2 | 2 |                    |  |
| 9                     | 8 | 2           | 2 | 9 | 2 | 2 | 3 | 7 | 8 | 9 | 7 | 7 | 0 | 4 | 4 | 8 | 3 | 6 | 2 | 2 | 2 | 2 | 2 | 2 |   |                    |  |
| 0                     | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                    |  |
| 0                     | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                    |  |
| 1                     | 1 | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |                    |  |
| 5                     | 9 | 9           | 5 | 8 | 7 | 8 | 6 | 8 | 7 | 0 | 8 | 8 | 8 | 9 | 8 | 8 | 5 | 7 | 9 | 6 | 6 | 6 | 6 | 6 |   |                    |  |
| 7                     | 9 | 4           | 6 | 2 | 2 | 1 | 2 | 3 | 0 | 0 | 7 | 9 | 4 | 0 | 5 | 8 | 4 | 9 | 1 | 1 | 3 | 4 | 7 | 9 |   |                    |  |
| 0                     | 0 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                    |  |

Osteosarcoma, Metastatic, Uncertain Primary Site

## NERVOUS SYSTEM

Brain

Carcinoma, Metastatic, Pituitary Gland

+ X

Peripheral Nerve

+ +

Spinal Cord

+ +

## RESPIRATORY SYSTEM

Lung

Alveolar/Bronchiolar Adenoma

Osteosarcoma, Metastatic, Bone

+ X

X

Nose

+ +

Trachea

+ +

## SPECIAL SENSES SYSTEM

Eye

+ +

Harderian Gland

+ +

Zymbal's Gland  
Carcinoma

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                       |          | DAY ON TEST | males<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------|----------|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                       |          |             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FISCHER 344 RATS MALE | 90 MG/KG | ANIMAL ID   | 4                  | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                       |          |             | 4                  | 4 | 6 | 2 | 6 | 6 | 3 | 3 | 3 | 5 | 5 | 6 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |
|                       |          |             | 9                  | 8 | 2 | 2 | 9 | 2 | 2 | 3 | 7 | 8 | 9 | 7 | 7 | 0 | 4 | 4 | 8 | 3 | 6 | 9 | 9 | 9 | 9 | 9 |
|                       |          |             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       |          |             | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       |          |             | 1                  | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                       |          |             | 5                  | 9 | 9 | 5 | 8 | 7 | 8 | 6 | 8 | 7 | 0 | 8 | 8 | 8 | 9 | 8 | 8 | 5 | 7 | 9 | 6 | 6 | 6 | 6 |
|                       |          |             | 7                  | 9 | 4 | 6 | 2 | 2 | 1 | 2 | 3 | 0 | 0 | 7 | 9 | 4 | 0 | 5 | 8 | 4 | 9 | 1 | 1 | 3 | 4 | 7 |

Kidney

Urinary Bladder

+ +

+ +

## SYSTEMIC LESIONS

Multiple Organ  
Leukemia Mononuclear  
Mesothelioma Malignant

+ + + + + + + + + X + + + + + X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically

TDMS No. 95003 - 05

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## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                       | DAY ON TEST | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      |                       |                       | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE | ANIMAL ID   | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>8<br>0 | 0<br>0<br>1<br>9<br>7 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>6<br>4 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>9<br>3 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>7 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>7<br>8 | 0<br>0<br>1<br>7<br>9 | 0<br>0<br>1<br>7<br>5 | 0<br>0<br>1<br>7<br>5 | 0<br>0<br>1<br>7<br>8 | 0<br>0<br>1<br>7<br>9 |
| 90 MG/KG              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

\* TOTALS

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | +  | +  | 48 |
| Intestine Large, Cecum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Intestine Large, Colon                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |    |
| Intestine Small, Duodenum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Intestine Small, Ileum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |    |
| Intestine Small, Jejunum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |    |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Hepatocellular Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 2  |    |    |
| Hepatocellular Adenoma, Multiple       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 1  |    |    |
| Mesentery                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 12 |    |
| Oral Mucosa                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |    |
| Squamous Cell Carcinoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |    |
| Squamous Cell Papilloma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |    |
| Pancreas                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Acinus, Adenoma                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |    |
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Schwannoma Malignant, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

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TDMS No. 95003 - 05

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**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

## Methyl trans-styryl ketone

**CAS Number:** 1896-62-4

**Date Report Requested:** 02/22/2010

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**First Dose M/F:** 04/05/04 / 04/05/04

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TDMS No. 95003 - 05

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Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

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Lab: SRI

| FISCHER 344 RATS MALE                | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|--------------------------------------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                      |             | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |                       |                       |
| 90 MG/KG                             | ANIMAL ID   | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>7<br>6 | 0<br>0<br>1<br>8<br>0 | 0<br>0<br>1<br>9<br>7 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>8 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>7<br>4 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>9<br>3 | 0<br>0<br>1<br>9<br>5 | 0<br>0<br>1<br>6<br>2 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>7<br>3 | 0<br>0<br>1<br>7<br>8 | 0<br>0<br>1<br>9<br>2 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>7<br>5 | 0<br>0<br>1<br>8<br>6 |
| Lymph Node, Mandibular               |             | M                     | M                     | M                     | +                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | 4                     |
| Lymph Node, Mesenteric               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Spleen                               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Thymus                               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |
| Carcinoma, Metastatic, Thyroid Gland |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Thymoma Benign                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| <b>INTEGUMENTARY SYSTEM</b>          |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Mammary Gland                        |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |
| Adenoma                              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Fibroadenoma                         |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Skin                                 |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Basal Cell Adenoma                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Fibroma                              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Keratoacanthoma                      |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |
| Schwannoma Malignant                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Squamous Cell Papilloma              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Trichoepithelioma                    |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Sebaceous Gland, Adenoma             |             |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |

**MUSCULOSKELETAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Osteosarcoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST                                      |   | 0<br>7    | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | * TOTALS |        |    |   |
|--|---|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|----|---|
| FISCHER 344 RATS MALE                            |   | 2<br>9    | 2<br>9 | 2<br>9 | 2<br>9 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>0 | 3<br>1 | 3<br>1 | 3<br>1 | 3<br>1 | 3<br>1 | 3<br>1 | 3<br>2 |          |        |    |   |
| 90 MG/KG   |   | ANIMAL ID |        | 0<br>0   | 0<br>0 |    |   |
| Osteosarcoma, Metastatic, Uncertain Primary Site |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |        |    |   |
| <b>NERVOUS SYSTEM</b>                            |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 50       |        |    |   |
| Brain  | +     | X         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2      |    |   |
| Carcinoma, Metastatic, Pituitary Gland           |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |   |
| Peripheral Nerve                                 |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 3  |   |
| Spinal Cord                                      |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 3  |   |
| <b>RESPIRATORY SYSTEM</b>                        |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 50       |        |    |   |
| Lung   | + | X         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 2  |   |
| Alveolar/Bronchiolar Adenoma                     |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 1  |   |
| Osteosarcoma, Metastatic, Bone                   |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |   |
| Nose   | + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 50 |   |
| Trachea  | + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 50 |   |
| <b>SPECIAL SENSES SYSTEM</b>                     |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 50     |    |   |
| Eye  | + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |   |
| Harderian Gland                                  | + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | 50 |   |
| Zymbal's Gland                                   |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    | 1 |
| Carcinoma  |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    | 1 |
| <b>URINARY SYSTEM</b>                            |   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1      |    |   |

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|                         |          | DAY ON TEST     | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      |                       |          |  |    | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                         |          | ANIMAL ID       | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>8<br>6 | 0<br>0<br>1<br>9<br>0 | 0<br>0<br>1<br>5<br>7 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>7<br>7 | 0<br>0<br>1<br>9<br>3 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>6<br>2 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>6<br>8 | 0<br>0<br>1<br>7<br>3 | 0<br>0<br>1<br>7<br>8 | 0<br>0<br>1<br>9<br>2 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>1<br>9<br>1 | 0<br>0<br>1<br>9<br>5 | 0<br>0<br>1<br>9<br>1 | 0<br>0<br>1<br>9<br>5 | 0<br>0<br>1<br>9<br>1 | * TOTALS |  |    |
| FISCHER 344 RATS MALE   | 90 MG/KG | Kidney          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |    |
|                         |          | Urinary Bladder | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |    |
| <b>SYSTEMIC LESIONS</b> |          |                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |    |
| Multiple Organ          |          | +               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |    |
| Leukemia Mononuclear    |          |                 |                       |                       | X                     | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 24 |
| Mesothelioma Malignant  |          |                 |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 2  |

\*\*\* END OF MALE DATA \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | 0 MG/KG | DAY ON TEST | ANIMAL ID |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | females<br>(cont...) |
|-------------------------|---------|-------------|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------|
|                         |         |             | 000       | 045 | 056 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 |                      |
|                         |         | 222         | 64        | 55  | 60  | 62  | 62  | 34  | 44  | 54  | 55  | 55  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57  | 57                   |
|                         |         | 223         | 222       | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222 | 222                  |
|                         |         | 226         | 39        | 88  | 55  | 11  | 11  | 44  | 99  | 70  | 03  | 22  | 55  | 78  | 22  | 84  | 22  | 84  | 22  | 84  | 22  | 84  | 22  | 84  | 22  | 84  | 22                   |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | A | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery                 |   | + | + |   |   | + | + | + |   | + | + | + | + | + | + |   |   | + |   |   | + |   | + |   |   | + |
| Pancreas                  | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## CARDIOVASCULAR SYSTEM

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

## ENDOCRINE SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE   | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   | females<br>(cont...) |   |   |   |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|----------------------|---|---|---|
|   |             | 0<br>0<br>2<br>2<br>2 | 0<br>4<br>5<br>5<br>6 | 0<br>6<br>0<br>9<br>2 | 0<br>6<br>6<br>9<br>2 | 0<br>6<br>4<br>0<br>4 | 0<br>6<br>4<br>4<br>6 | 0<br>6<br>5<br>3<br>0 | 0<br>6<br>5<br>9<br>3 | 0<br>6<br>7<br>5<br>5 | 0<br>6<br>7<br>7<br>7 | 0<br>7<br>0<br>1<br>1 | 0<br>7<br>0<br>8<br>0 | 0<br>7<br>1<br>1<br>4 | 0<br>7<br>1<br>0<br>0 | 0<br>7<br>2<br>2<br>4 | 0<br>7<br>2<br>2<br>0 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>2<br>2 |   |   |                      |   |   |   |
| Adrenal Cortex<br>Adenoma   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | X                    |   |   |   |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      | X |   |   |
| Adrenal Medulla<br>Pheochromocytoma Benign  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | M | +                    | + | + | + |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |   |   |   |
| Islets, Pancreatic<br>Adenoma   |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | X                    |   |   |   |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |   |   |   |
| Parathyroid Gland<br>Adenoma  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    | + | + |   |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |   |   |   |
| Pituitary Gland<br>Pars Distalis, Adenoma<br>Pars Distalis, Carcinoma             |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    | + | X |   |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      | X |   |   |
| Thyroid Gland<br>C-cell, Adenoma<br>C-cell, Carcinoma<br>Follicular Cell, Adenoma |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | X | X                    |   |   |   |
|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |   |   |   |

## GENERAL BODY SYSTEM

|            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Tissue NOS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

## GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland<br>Adenoma<br>Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X |
| Ovary                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|                         |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
| 0 MG/KG                 | 0           | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                      |
|                         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
|                         | 2           | 2 | 2 | 5 | 0 | 2 | 2 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 7 | 7 | 7 | 0 | 1 | 1 | 2 | 3 | 3 | 3 | 3 |                      |
|                         | 2           | 2 | 6 | 4 | 5 | 9 | 9 | 2 | 0 | 4 | 6 | 0 | 3 | 9 | 5 | 7 | 7 | 1 | 8 | 0 | 4 | 2 | 2 | 2 | 2 |                      |
|                         | 3           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |                      |
|                         | 6           | 3 | 2 | 3 | 2 | 0 | 3 | 2 | 4 | 0 | 4 | 2 | 0 | 3 | 2 | 5 | 4 | 7 | 8 | 2 | 4 | 2 | 2 | 2 | 3 |                      |

Granulosa Cell Tumor Benign

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Uterus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Polyp Stromal           | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Polyp Stromal, Multiple | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Vagina

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + |
|---|---|---|---|---|---|---|

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node             | + | + |   |   | + | + |   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymoma Benign         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

## INTEGUMENTARY SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma              | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma           | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma, Multiple | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Skin                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibroma                | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

DAY ON TEST

## FISCHER 344 RATS FEMALE

0 MG/KG

ANIMAL ID

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 2 | 2 | 5 | 0 | 2 | 2 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 7 | 7 | 0 | 1 | 1 | 2 | 3 | 3 | 3 | 3 |
| 2 | 6 | 4 | 5 | 9 | 2 | 9 | 2 | 0 | 4 | 6 | 0 | 3 | 9 | 5 | 7 | 7 | 1 | 8 | 0 | 4 | 2 | 2 | 2 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 3 | 2 | 3 | 2 | 0 | 3 | 2 | 4 | 0 | 4 | 2 | 0 | 3 | 2 | 3 | 4 | 2 | 2 | 0 | 3 | 3 | 1 | 2 | 2 |
| 6 | 3 | 9 | 8 | 5 | 1 | 1 | 4 | 9 | 7 | 0 | 0 | 3 | 2 | 5 | 4 | 7 | 8 | 2 | 8 | 4 | 2 | 4 | 5 |

females  
(cont...)

## MUSCULOSKELETAL SYSTEM

Bone

+ +

Skeletal Muscle

+

## NERVOUS SYSTEM

Brain

+ +

X

Carcinoma, Metastatic, Pituitary Gland

Peripheral Nerve

Spinal Cord

## RESPIRATORY SYSTEM

Lung

+ +

X

Alveolar/Bronchiolar Adenoma

Nose

+ + + + + + + + + + A + + + + + + A +

Trachea

+ +

## SPECIAL SENSES SYSTEM

Eye

+ +

Harderian Gland

+ +

Adenoma

X

## URINARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                                |  | DAY ON TEST | 0<br>0<br>2<br>2           | 0<br>4<br>2<br>6           | 0<br>5<br>5<br>4           | 0<br>6<br>0<br>9           | 0<br>6<br>2<br>2           | 0<br>6<br>3<br>0           | 0<br>4<br>4<br>0           | 0<br>6<br>4<br>6           | 0<br>6<br>5<br>0           | 0<br>6<br>5<br>3           | 0<br>6<br>5<br>9           | 0<br>7<br>7<br>5           | 0<br>7<br>0<br>1           | 0<br>7<br>0<br>8           | 0<br>7<br>1<br>0           | 0<br>7<br>1<br>4           | 0<br>7<br>2<br>0           | 0<br>7<br>2<br>2           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>2           |                            |   |  |
|--------------------------------|--|-------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|--|
|                                |  | ANIMAL ID   | 0<br>0<br>2<br>2<br>3<br>6 | 0<br>0<br>2<br>2<br>3<br>3 | 0<br>0<br>2<br>2<br>0<br>1 | 0<br>0<br>2<br>2<br>3<br>1 | 0<br>0<br>2<br>2<br>4<br>4 | 0<br>0<br>2<br>2<br>4<br>9 | 0<br>0<br>2<br>2<br>0<br>0 | 0<br>0<br>2<br>2<br>0<br>3 | 0<br>0<br>2<br>2<br>0<br>2 | 0<br>0<br>2<br>2<br>5<br>5 | 0<br>0<br>2<br>2<br>4<br>5 | 0<br>0<br>2<br>2<br>4<br>7 | 0<br>0<br>2<br>2<br>0<br>8 | 0<br>0<br>2<br>2<br>3<br>2 | 0<br>0<br>2<br>2<br>3<br>4 | 0<br>0<br>2<br>2<br>2<br>4 | 0<br>0<br>2<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2<br>3 | 0<br>0<br>2<br>2<br>2<br>3 |   |  |
| <b>FISCHER 344 RATS FEMALE</b> |  |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |   |  |
| <b>0 MG/KG</b>                 |  |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |   |  |
| Kidney                         |  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + |  |
| Urinary Bladder                |  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + |  |
| <b>SYSTEMIC LESIONS</b>        |  |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |   |  |
| Multiple Organ                 |  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + |  |
| Leukemia Mononuclear           |  |             | X                          | X                          |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | 0 MG/KG | ANIMAL ID | DAY ON TEST                |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            | * TOTALS                   |
|-------------------------|---------|-----------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
|                         |         |           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>2           | 0<br>7<br>3<br>3           |                            |                            |
|                         |         |           | 0<br>0<br>0<br>2<br>4<br>1 | 0<br>0<br>0<br>2<br>0<br>6 | 0<br>0<br>0<br>2<br>0<br>1 | 0<br>0<br>0<br>2<br>0<br>3 | 0<br>0<br>0<br>2<br>1<br>5 | 0<br>0<br>0<br>2<br>1<br>6 | 0<br>0<br>0<br>2<br>1<br>3 | 0<br>0<br>0<br>2<br>1<br>4 | 0<br>0<br>0<br>2<br>1<br>3 |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mesentery                 | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 23 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## CARDIOVASCULAR SYSTEM

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

## ENDOCRINE SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE  | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |    |
|--------------------------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|                          |             | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      |                       |                       |    |
| 0 MG/KG                  | ANIMAL ID   | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>0<br>6 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>7 | 0<br>0<br>1<br>1<br>1 | 0<br>0<br>1<br>1<br>5 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>1<br>3 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>1<br>5 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>1<br>3 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>1<br>3 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>1<br>5 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>1<br>7 | 0<br>0<br>1<br>1<br>8 | 0<br>0<br>1<br>1<br>9 | 0<br>0<br>1<br>2<br>0 |    |
| Adrenal Cortex           |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Adenoma                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | 4                     |    |
| Adrenal Medulla          |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |    |
| Pheochromocytoma Benign  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | 1                     |    |
| Islets, Pancreatic       |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |    |
| Adenoma                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | 3                     |    |
| Parathyroid Gland        |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Adenoma                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | 1                     |    |
| Pituitary Gland          |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Pars Distalis, Adenoma   |             | X                     | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | 31 |
| Pars Distalis, Carcinoma |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |    |
| Thyroid Gland            |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| C-cell, Adenoma          |             |                       |                       | X                     |                       |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | 7  |
| C-cell, Carcinoma        |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |    |
| Follicular Cell, Adenoma |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |    |

## GENERAL BODY SYSTEM

|            |   |
|------------|---|
| Tissue NOS | 1 |
|------------|---|

## GENITAL SYSTEM

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 6  |
| Carcinoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 3  |
| Ovary          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE     | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |                       |    |    |
|-----------------------------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----|
|                             |             | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      |                       |                       |                       |    |    |
| 0 MG/KG                     | ANIMAL ID   | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>4<br>6 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>2<br>0<br>6 | 0<br>0<br>2<br>1<br>7 | 0<br>0<br>1<br>1<br>1 | 0<br>0<br>1<br>1<br>5 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>4<br>8 | 0<br>0<br>1<br>4<br>9 | 0<br>0<br>1<br>5<br>0 | 0<br>0<br>1<br>2<br>0 | 0<br>0<br>1<br>2<br>2 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>7 | 0<br>0<br>1<br>1<br>8 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>3<br>2 |    |    |
| Granulosa Cell Tumor Benign |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | 1                     |                       |    |    |
| Uterus                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50                    |                       |    |    |
| Polyp Stromal               |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | 9                     |    |    |
| Polyp Stromal, Multiple     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | 1                     |    |    |
| Vagina                      |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 6                     |    |    |
| <b>HEMATOPOIETIC SYSTEM</b> |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |    |
| Bone Marrow                 |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50                    |    |    |
| Lymph Node                  |             |                       | +                     | +                     |                       |                       | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 16 |    |
| Lymph Node, Mandibular      |             | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | 3                     |    |    |
| Lymph Node, Mesenteric      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50 |    |
| Spleen                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50 |    |
| Thymus                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50 |    |
| Thymoma Benign              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | 1                     |    |    |
| <b>INTEGUMENTARY SYSTEM</b> |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |    |
| Mammary Gland               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50 |    |
| Adenoma                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1  |
| Carcinoma                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2  |
| Fibroadenoma                |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 13 |
| Fibroadenoma, Multiple      |             | X                     | X                     |                       |                       | X                     | X                     | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 6  |    |
| Skin                        |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       | 50 |    |
| Fibroma                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 3  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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TDMS No. 95003 - 05

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|  |  | DAY ON TEST    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <b>* TOTALS</b>       |                  |    |  |
|--|--|----------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|----|--|
|  |  |                | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      |                       |                       |                  |    |  |
| <b>FISCHER 344 RATS FEMALE</b>         |  | <b>0 MG/KG</b> |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <b>* TOTALS</b>       |                  |    |  |
|  |  |                | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>4<br>6 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>2<br>0<br>6 | 0<br>0<br>2<br>1<br>7 | 0<br>0<br>2<br>1<br>1 | 0<br>0<br>2<br>1<br>5 | 0<br>0<br>2<br>1<br>6 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>2<br>3<br>4 | 0<br>0<br>2<br>4<br>8 | 0<br>0<br>2<br>4<br>9 | 0<br>0<br>2<br>5<br>0 | 0<br>0<br>2<br>1<br>0 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>1<br>2 | 0<br>0<br>2<br>1<br>7 | 0<br>0<br>2<br>1<br>8 | 0<br>0<br>2<br>1<br>9 | 0<br>0<br>2<br>6<br>9 | 0<br>0<br>2<br>0 |    |  |
| <b>MUSCULOSKELETAL SYSTEM</b>          |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |    |  |
| Bone                                   |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| Skeletal Muscle                        |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 1  |  |
| <b>NERVOUS SYSTEM</b>                  |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |    |  |
| Brain                                  |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| Carcinoma, Metastatic, Pituitary Gland |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 2  |  |
| Peripheral Nerve                       |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 1  |  |
| Spinal Cord                            |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 1  |  |
| <b>RESPIRATORY SYSTEM</b>              |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |    |  |
| Lung                                   |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| Alveolar/Bronchiolar Adenoma           |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 1  |  |
| Nose                                   |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 48 |  |
| Trachea                                |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| <b>SPECIAL SENSES SYSTEM</b>           |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |    |  |
| Eye                                    |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| Harderian Gland                        |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 50 |  |
| Adenoma                                |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | 2  |  |
| <b>URINARY SYSTEM</b>                  |  |                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |    |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE                | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |    |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|----|
|  |             | 0<br>7 |          |        |    |
| 0 MG/KG                                | ANIMAL ID   | 3<br>3 |          |        |    |
|  |             | 2<br>2 |          |        |    |
|  |             | 4<br>4 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 1<br>1 | 1<br>1 | 1<br>1 | 3<br>3 | 3<br>3 | 3<br>3 | 4<br>4 | 4<br>4 | 5<br>5 | 1<br>1 | 1<br>1 | 1<br>1 | 2<br>2 | 2<br>2 | 2<br>2 | 3<br>4   |        |    |
|  |             | 1<br>1 | 6<br>6 | 1<br>1 | 4<br>4 | 6<br>6 | 7<br>7 | 1<br>1 | 3<br>3 | 5<br>6 | 6<br>3 | 3<br>4 | 3<br>3 | 8<br>9 | 0<br>0 | 0<br>2 | 7<br>2 | 8<br>7 | 9<br>8 | 6<br>9 | 9<br>6 | 2<br>9   | 0<br>2 |    |
|  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |
|  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |
| Kidney                                 |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |    |
| Urinary Bladder                        |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | 50 |
| <b>SYSTEMIC LESIONS</b>                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |    |
| Multiple Organ<br>Leukemia Mononuclear |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | 50 |
|  |             | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X        | 18     |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                         | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
|                         |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
| FISCHER 344 RATS FEMALE | 3           | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7                    | 7 |
| 10 MG/KG                | 7           | 9 | 1 | 2 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 8 | 0 | 0 | 3 | 3 | 3 | 8 | 5 | 1 | 1                    | 2 |
|                         | 2           | 2 | 3 | 5 | 0 | 0 | 7 | 7 | 7 | 2 | 8 | 1 | 9 | 5 | 6 | 4 | 2 | 2 | 6 | 3 | 3 | 8 | 5 | 6 | 6 | 4                    |   |
|                         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
|                         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
|                         | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2                    |   |
|                         | 5           | 7 | 8 | 8 | 8 | 8 | 6 | 9 | 8 | 7 | 7 | 6 | 9 | 9 | 8 | 7 | 7 | 6 | 8 | 5 | 8 | 5 | 5 | 6 | 9 | 5                    |   |
|                         | 3           | 6 | 6 | 7 | 8 | 6 | 5 | 3 | 5 | 2 | 7 | 0 | 7 | 9 | 4 | 0 | 9 | 2 | 9 | 1 | 8 | 6 | 3 | 3 | 2 |                      |   |

## ALIMENTARY SYSTEM

Esophagus

Intestine Large, Cecum

Intestine Large, Colon

Intestine Large, Rectum

Intestine Small, Duodenum

Intestine Small, Ileum

Intestine Small, Jejunum

Liver

Mesentery

Pancreas

Salivary Glands  
Schwannoma MalignantStomach, Forestomach  
Squamous Cell Papilloma

Stomach, Glandular

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + |   | + | + | + | + | + | + | + | + | + | + | + | + | + |   | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | + | A | + | + | A | A | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | A | + | + | A | A | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## CARDIOVASCULAR SYSTEM

Blood Vessel

+

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                                |  | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|--------------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS FEMALE</b> |  | 3           | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |
| <b>10 MG/KG</b>                |  | 7           | 9 | 1 | 2 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 8 | 0 | 3 | 3 | 8 | 5 | 1 | 1 | 2 |   |
|                                |  | 2           | 2 | 3 | 5 | 0 | 0 | 7 | 7 | 2 | 8 | 1 | 9 | 5 | 6 | 4 | 2 | 6 | 3 | 3 | 8 | 5 | 1 | 6 | 6 | 4 |   |
|                                |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                                |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                                |  | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |
|                                |  | 5           | 7 | 8 | 8 | 8 | 8 | 6 | 9 | 8 | 7 | 7 | 6 | 9 | 9 | 8 | 7 | 7 | 6 | 8 | 5 | 8 | 5 | 5 | 6 | 9 | 5 |
|                                |  | 3           | 6 | 6 | 7 | 8 | 6 | 5 | 3 | 5 | 2 | 7 | 0 | 7 | 9 | 4 | 0 | 9 | 2 | 9 | 1 | 8 | 6 | 3 | 3 | 2 |   |

females  
(cont...)

Heart

+ +

**ENDOCRINE SYSTEM**Adrenal Cortex  
Adenoma

+ + + + + + + + + X + + + + + + + + + + + + + + + + + +

Adrenal Medulla  
Pheochromocytoma Benign

+ + M + X

Islets, Pancreatic

+ +

Parathyroid Gland

+ +

Pituitary Gland  
Pars Distalis, Adenoma  
Pars Distalis, Adenoma, Multiple

+ X X

Thyroid Gland  
C-cell, Adenoma

+ X

**GENERAL BODY SYSTEM**

Tissue NOS

**GENITAL SYSTEM**Clitoral Gland  
Adenoma  
Adenoma, Multiple  
Carcinoma  
Fibrosarcoma

+ X X

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                         |             | 3 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
| 10 MG/KG                | ANIMAL ID   | 7 | 9 | 1 | 2 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 8 | 0 | 7 | 0 | 1 | 1 | 1 | 2 |
|                         |             | 2 | 3 | 5 | 0 | 0 | 7 | 7 | 2 | 8 | 1 | 9 | 5 | 6 | 4 | 2 | 6 | 3 | 3 | 8 | 5 | 1 | 6 | 6 | 4 |

females  
(cont...)

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Ovary                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Uterus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Polyp Stromal           |   | X |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | X |  |
| Polyp Stromal, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Sarcoma Stromal         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Vagina                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | + |   |   |   |   |   |  |

## HEMATOPOIETIC SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Mediastinal, Schwannoma Malignant, |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Metastatic, Salivary Glands        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mandibular             | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |  |
| Lymph Node, Mesenteric             | + | + | + | + |   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Spleen                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

## INTEGUMENTARY SYSTEM

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |
| Carcinoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma        | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   | X |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

DAY ON TEST

**FISCHER 344 RATS FEMALE****10 MG/KG**

ANIMAL ID

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 3 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 7 | 9 | 1 | 2 | 2 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 8 | 0 | 3 | 3 | 3 | 3 | 8 | 5 | 1 | 1 | 1 | 2 | 4 |   |
| 2 | 2 | 3 | 5 | 0 | 0 | 7 | 7 | 7 | 2 | 8 | 1 | 9 | 5 | 6 | 4 | 2 | 6 | 6 | 3 | 3 | 3 | 8 | 5 | 1 | 6 | 6 | 4 | 2 | 4 |   |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |
| 5 | 7 | 8 | 8 | 8 | 8 | 6 | 9 | 8 | 7 | 7 | 6 | 9 | 9 | 8 | 7 | 7 | 6 | 8 | 5 | 8 | 5 | 8 | 5 | 5 | 6 | 9 | 5 | 5 | 5 |   |
| 3 | 6 | 6 | 7 | 8 | 6 | 5 | 3 | 5 | 2 | 7 | 0 | 7 | 9 | 4 | 0 | 9 | 2 | 9 | 1 | 8 | 6 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 2 |   |

**females  
(cont...)**

Fibroadenoma, Multiple

X X

Skin

+ +

Basal Cell Adenoma

**MUSCULOSKELETAL SYSTEM**

Bone

Osteosarcoma

+ +

X

Skeletal Muscle

+

**NERVOUS SYSTEM**

Brain

+ +

Peripheral Nerve

+ +

Spinal Cord

+ +

**RESPIRATORY SYSTEM**

Lung

Carcinoma, Metastatic, Mammary Gland

Schwannoma Malignant, Metastatic, Salivary Glands

+ +

X

Nose

+ +

Trachea

+ +

**SPECIAL SENSES SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                                     |          | DAY ON TEST             | 0<br>3<br>7<br>2      | 0<br>4<br>9<br>2      | 0<br>5<br>1<br>3      | 0<br>5<br>2<br>0      | 0<br>5<br>3<br>7      | 0<br>5<br>4<br>7      | 0<br>5<br>6<br>2      | 0<br>5<br>7<br>8      | 0<br>6<br>9<br>1      | 0<br>6<br>9<br>5      | 0<br>6<br>1<br>6      | 0<br>6<br>4<br>4      | 0<br>6<br>2<br>2      | 0<br>6<br>2<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>0<br>3      | 0<br>7<br>0<br>3      | 0<br>7<br>1<br>8      | 0<br>7<br>1<br>5      | 0<br>7<br>1<br>6      | 0<br>7<br>1<br>4      |                      |   |   |
|-------------------------------------|----------|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|---|---|
|                                     |          | ANIMAL ID               | 0<br>0<br>2<br>5<br>3 | 0<br>0<br>2<br>7<br>6 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>7<br>2 | 0<br>0<br>2<br>7<br>7 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>8<br>4 | 0<br>0<br>2<br>7<br>0 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>8<br>1 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>2 | females<br>(cont...) |   |   |
| FISCHER 344 RATS FEMALE             | 10 MG/KG |                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |   |
|                                     |          | Eye                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |   |
|                                     |          | Harderian Gland Adenoma | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |   |
| <b>URINARY SYSTEM</b>               |          |                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |   |
| Kidney                              |          | +                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |   |
| Urinary Bladder                     |          | +                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |   |
| <b>SYSTEMIC LESIONS</b>             |          |                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |   |
| Multiple Organ Leukemia Mononuclear |          | +                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |   |
|                                     |          |                         |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | X                     |                       |                       | X                     |                       | X                     |                       | X                     |                       | X                    |   | X |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

**Test Type: CHRONIC**

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

## Methyl trans-styryl ketone

**CAS Number:** 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

# ALIMENTARY SYSTEM

## CARDIOVASCULAR SYSTEM

Blood Vessel

1

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

## I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE          | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |          |        |        |
|----------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----------|--------|--------|
|                                  |             | 0<br>7 |          |          |        |        |
| 10 MG/KG                         | ANIMAL ID   | 2<br>2 | 3<br>3   | * TOTALS |        |        |
|                                  |             | 2<br>2   |          |        |        |
|                                  |             | 7<br>7 | 6<br>5 | 8<br>5 | 8<br>6 | 9<br>4 | 5<br>4 | 6<br>1 | 6<br>2 | 7<br>1 | 7<br>8 | 9<br>2 | 9<br>4 | 9<br>9 | 0<br>0 | 1<br>1 | 5<br>5 | 5<br>7 | 6<br>0 | 6<br>4 | 6<br>8 | 7<br>3   | 7<br>9   | 5<br>1 | 8<br>8 |
| Heart                            |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| <b>ENDOCRINE SYSTEM</b>          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |        |        |
| Adrenal Cortex                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| Adenoma                          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          | 3      |        |
| Adrenal Medulla                  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 49       |        |        |
| Pheochromocytoma Benign          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          | 3      |        |
| Islets, Pancreatic               |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| Parathyroid Gland                |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| Pituitary Gland                  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| Pars Distalis, Adenoma           |             | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X      | X        | 33       |        |        |
| Pars Distalis, Adenoma, Multiple |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2        |        |        |
| Thyroid Gland                    |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |        |        |
| C-cell, Adenoma                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 4        |        |        |

**GENERAL BODY SYSTEM**

|            |  |   |   |
|------------|--|---|---|
| Tissue NOS |  | + | 1 |
|------------|--|---|---|

**GENITAL SYSTEM**

|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Clitoral Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Carcinoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Fibrosarcoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE            | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |
|------------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----|
|                                    |             | 0<br>7 |          |    |
| 10 MG/KG                           | ANIMAL ID   | 2<br>2 | 3<br>3 |          |    |
|                                    |             | 0<br>0 |          |    |
| Ovary                              |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |
| Uterus                             |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |
| Polyp Stromal                      |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |        |          | 7  |
| Polyp Stromal, Multiple            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |          | 1  |
| Sarcoma Stromal                    |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| Vagina                             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | +      |        |        |        |        |        |        |        |          | 6  |
| <b>HEMATOPOIETIC SYSTEM</b>        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Bone Marrow                        |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |
| Lymph Node                         |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | +      |        |        |        |        |        |        |        |          | 13 |
| Mediastinal, Schwannoma Malignant, |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |          | 1  |
| Metastatic, Salivary Glands        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Lymph Node, Mandibular             |             | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | M      | 2        |    |
| Lymph Node, Mesenteric             |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |    |
| Spleen                             |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |
| Thymus                             |             | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |    |

**INTEGUMENTARY SYSTEM**

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Mammary Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Adenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Carcinoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |    | 3  |
| Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Fibroadenoma        | X | X |   |   |   |   |   |   | X | X | X |   |   |   |   |   |   | X | X |   |   |   |   |   |   |    | 13 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

**Test Type:** CHRONIC

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## Methyl trans-styryl ketone

CAS Number: 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

\* Total animals with tissue examined microscopically; Total animals with tumor

† = Tissue examined microscopically

X Lesion present

| Insufficient tissue

M Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 95003 - 05

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## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|  | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|
|  |             | 0<br>7 |          |        |
| FISCHER 344 RATS FEMALE                |             | 2<br>6 | 3<br>2 | 3<br>2 | 3<br>2 | 3<br>3   |        |
| 10 MG/KG                               |             | 0<br>0   |        |
|  | ANIMAL ID   | 2<br>2   |        |
|  |             | 7<br>7 | 6<br>5 | 8<br>5 | 8<br>4 | 9<br>6 | 5<br>4 | 6<br>1 | 6<br>2 | 7<br>1 | 7<br>8 | 9<br>2 | 9<br>4 | 9<br>9 | 0<br>0 | 1<br>1 | 5<br>5 | 5<br>5 | 7<br>7 | 0<br>0 | 6<br>4 | 6<br>8 | 6<br>3 | 7<br>9 | 8<br>5 | 9<br>1   | 8<br>8 |
| Eye                                    |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |        |
| Harderian Gland<br>Adenoma             |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |        |
|  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1      |
| <b>URINARY SYSTEM</b>                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |
| Kidney                                 |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |        |
| Urinary Bladder                        |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |        |
| <b>SYSTEMIC LESIONS</b>                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |
| Multiple Organ<br>Leukemia Mononuclear |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |        |
|  |             | X      |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 11     |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

DAY ON TEST

**FISCHER 344 RATS FEMALE****30 MG/KG**

ANIMAL ID

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 0 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 7 | 5 | 5 | 5 | 5 | 5 | 8 | 8 | 9 | 0 | 1 | 2 | 3 | 7 | 8 | 9 | 0 | 3 | 4 | 8 | 8 | 0 | 1 | 5 | 1 | 2 | 2 | 3 | 3 | 3 |
| 5 | 3 | 5 | 4 | 7 | 3 | 7 | 1 | 5 | 4 | 7 | 2 | 2 | 9 | 7 | 4 | 3 | 4 | 8 | 8 | 0 | 0 | 5 | 1 | 2 | 2 | 3 | 2 | 2 |   |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| 2 | 4 | 0 | 3 | 3 | 0 | 4 | 2 | 4 | 2 | 3 | 2 | 1 | 0 | 2 | 0 | 3 | 0 | 3 | 0 | 2 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 |
| 3 | 9 | 8 | 8 | 9 | 1 | 6 | 2 | 0 | 6 | 1 | 0 | 8 | 9 | 5 | 3 | 4 | 6 | 8 | 5 | 6 | 2 | 1 | 6 | 2 | 4 | 2 | 5 | 5 | 5 |

females  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

+ M + + + +

Intestine Large, Cecum

+ +

Intestine Large, Colon

+ +

Intestine Large, Rectum

M + | +

Intestine Small, Duodenum

+ +

Intestine Small, Ileum

+ + A +

Intestine Small, Jejunum

+ + + + + + A +

Liver  
Hepatocellular Adenoma

+ X

Mesentery  
Sarcoma

+ +

Pancreas

+ +

Salivary Glands

+ +

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

Tongue

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue



TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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DAY ON TEST

**FISCHER 344 RATS FEMALE****30 MG/KG**

ANIMAL ID

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 0 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
| 7 | 5 | 5 | 5 | 5 | 5 | 8 | 8 | 9 | 0 | 1 | 2 | 3 | 7 | 8 | 9 | 0 | 3 | 4 | 8 | 8 | 0 | 1 | 5 | 1 | 2 | 2 | 3 | 3 |
| 5 | 3 | 5 | 4 | 7 | 3 | 7 | 1 | 5 | 4 | 7 | 2 | 2 | 9 | 7 | 4 | 3 | 4 | 8 | 8 | 0 | 0 | 5 | 1 | 2 | 2 | 3 | 2 |   |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |   |
| 2 | 4 | 0 | 3 | 3 | 0 | 4 | 2 | 4 | 2 | 3 | 2 | 1 | 0 | 2 | 0 | 5 | 3 | 4 | 6 | 8 | 5 | 1 | 6 | 2 | 1 | 0 | 0 |   |
| 3 | 9 | 8 | 8 | 9 | 1 | 6 | 2 | 0 | 6 | 1 | 0 | 8 | 9 | 5 | 3 | 4 | 6 | 8 | 5 | 1 | 6 | 2 | 4 | 2 | 5 | 0 | 0 |   |

females  
(cont...)

NONE

**GENITAL SYSTEM**

Clitoral Gland

Adenoma

Carcinoma

Ovary

Uterus

Polyp Stromal

Polyp Stromal, Multiple

Vagina

Polyp

+ +

+ + + + + + + + + + + M +

+ + + + + + + + + + + X +

X X

+ + + X +

+ + + +

**HEMATOPOIETIC SYSTEM**

Bone Marrow

+ +

Lymph Node

+ + + + + + + + + + + M +

Lymph Node, Mandibular

M M M M + M M M M M M M M + M M M M M M M M M M M M M M M M M M

Lymph Node, Mesenteric

+ +

Spleen

+ +

Thymus

+ +

**INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

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Lab: SRI

|  |  | DAY ON TEST | 0<br>0<br>7<br>5<br>5 | 0<br>4<br>5<br>5<br>5 | 0<br>4<br>5<br>5<br>4 | 0<br>5<br>5<br>8<br>7 | 0<br>5<br>8<br>9<br>1 | 0<br>6<br>1<br>5<br>4 | 0<br>6<br>2<br>7<br>7 | 0<br>6<br>3<br>2<br>2 | 0<br>6<br>7<br>9<br>9 | 0<br>6<br>8<br>7<br>7 | 0<br>7<br>0<br>3<br>3 | 0<br>7<br>0<br>4<br>4 | 0<br>7<br>0<br>8<br>8 | 0<br>7<br>0<br>8<br>8 | 0<br>7<br>0<br>1<br>0 | 0<br>7<br>1<br>5<br>5 | 0<br>7<br>2<br>1<br>1 | 0<br>7<br>2<br>2<br>2 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>3<br>2 |                       |                      |  |  |
|--|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|--|
|  |  | ANIMAL ID   | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>4 | 0<br>0<br>3<br>3<br>0 | 0<br>0<br>3<br>3<br>0 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>1 | 0<br>0<br>3<br>3<br>0 | females<br>(cont...) |  |  |
| Mammary Gland                          |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                      |  |  |
| Carcinoma                              |  |             | X                     | X                     |                       |                       | X                     |                       |                       | X                     |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Fibroadenoma                           |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Fibroadenoma, Multiple                 |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Skin                                   |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |  |
| Keratoacanthoma                        |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Lipoma                                 |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| <b>MUSCULOSKELETAL SYSTEM</b>          |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Bone                                   |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |  |
| Chordoma                               |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Skeletal Muscle                        |  |             |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| <b>NERVOUS SYSTEM</b>                  |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Brain                                  |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |  |
| Carcinoma, Metastatic, Pituitary Gland |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Peripheral Nerve                       |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Spinal Cord                            |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| <b>RESPIRATORY SYSTEM</b>              |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Lung                                   |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |  |
| Alveolar/Bronchiolar Adenoma           |  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |  |
| Nose                                   |  | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |  |

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|                         |          | DAY ON TEST           | 0<br>0<br>7<br>5<br>5 | 0<br>4<br>5<br>5<br>5 | 0<br>4<br>5<br>5<br>4 | 0<br>5<br>5<br>8<br>7 | 0<br>5<br>8<br>9<br>1 | 0<br>6<br>1<br>5<br>4 | 0<br>6<br>2<br>7<br>4 | 0<br>6<br>3<br>2<br>7 | 0<br>6<br>7<br>9<br>9 | 0<br>6<br>8<br>7<br>7 | 0<br>7<br>0<br>3<br>4 | 0<br>7<br>7<br>0<br>8 | 0<br>7<br>0<br>1<br>8 | 0<br>7<br>1<br>5<br>5 | 0<br>7<br>2<br>2<br>1 | 0<br>7<br>2<br>2<br>2 | 0<br>7<br>3<br>3<br>2 | 0<br>7<br>3<br>3<br>2 |                       |                       |                      |   |  |
|-------------------------|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|---|--|
|                         |          | ANIMAL ID             | 0<br>0<br>3<br>2<br>3 | 0<br>0<br>3<br>4<br>9 | 0<br>0<br>3<br>0<br>8 | 0<br>0<br>3<br>0<br>9 | 0<br>0<br>3<br>2<br>1 | 0<br>0<br>2<br>2<br>6 | 0<br>0<br>2<br>0<br>2 | 0<br>0<br>2<br>1<br>1 | 0<br>0<br>1<br>0<br>9 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>3<br>0<br>6 | 0<br>0<br>2<br>3<br>4 | 0<br>0<br>2<br>1<br>6 | 0<br>0<br>1<br>5<br>8 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>2<br>4 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>0<br>5 | females<br>(cont...) |   |  |
| FISCHER 344 RATS FEMALE | 30 MG/KG |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |  |
|                         |          | Trachea               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | SPECIAL SENSES SYSTEM | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | Eye                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | Harderian Gland       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | URINARY SYSTEM        | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | Kidney                | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | Urinary Bladder       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | SYSTEMIC LESIONS      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    | + |  |
|                         |          | Multiple Organ        | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |  |
|                         |          | Histiocytic Sarcoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |  |
|                         |          | Leukemia Mononuclear  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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Species/Strain: RATS/F 344/N

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Lab: SRI

|                         | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |
|-------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|
|                         |             | 0<br>7 |          |        |
| FISCHER 344 RATS FEMALE | ANIMAL ID   | 3<br>2 |          |        |
|                         |             | 0<br>0   |        |
| 30 MG/KG                |             | 0<br>0   |        |
|                         |             | 3<br>3   |        |
|                         |             | 3<br>3   |        |
|                         |             | 0<br>5 | 5<br>6 | 1<br>1 | 4<br>4 | 4<br>5 | 0<br>1 | 1<br>4 | 2<br>7 | 2<br>3 | 3<br>3 | 4<br>7 | 4<br>8 | 4<br>4 | 0<br>7 | 1<br>1 | 1<br>3 | 1<br>7 | 1<br>9 | 2<br>9 | 2<br>2 | 7<br>0   | 2<br>0 |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 2  |
| Mesentery                 | + | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 23 |
| Sarcoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Tongue                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

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Lab: SRI

| FISCHER 344 RATS FEMALE | ANIMAL ID | 0<br>7<br>3<br>2                     | 0<br>7<br>3<br>2                     | 0<br>7<br>3<br>2                     | 0<br>7<br>3<br>2                     | 0<br>7<br>3<br>3                     | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                         |           | 0<br>0<br>0<br>0<br>3<br>3<br>3<br>0 | 0<br>0<br>0<br>0<br>3<br>3<br>3<br>5 | 0<br>0<br>0<br>0<br>3<br>3<br>4<br>1 | 0<br>0<br>0<br>0<br>3<br>3<br>4<br>0 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>1 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>4 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>7 | 0<br>0<br>0<br>0<br>3<br>3<br>3<br>3 | 0<br>0<br>0<br>0<br>3<br>3<br>4<br>7 | 0<br>0<br>0<br>0<br>3<br>3<br>4<br>8 | 0<br>0<br>0<br>0<br>3<br>3<br>4<br>4 | 0<br>0<br>0<br>0<br>3<br>3<br>0<br>7 | 0<br>0<br>0<br>0<br>3<br>3<br>0<br>1 | 0<br>0<br>0<br>0<br>3<br>3<br>1<br>1 | 0<br>0<br>0<br>0<br>3<br>3<br>1<br>3 | 0<br>0<br>0<br>0<br>3<br>3<br>1<br>9 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>9 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>2 | 0<br>0<br>0<br>0<br>3<br>3<br>2<br>0 |

\* TOTALS

NONE

## GENITAL SYSTEM

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Clitoral Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Ovary                   | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |
| Uterus                  | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |
| Polyp Stromal           |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 17 |
| Polyp Stromal, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Vagina                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 7  |
| Polyp                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Lymph Node             |   | + |   |   |   | + |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 14 |
| Lymph Node, Mandibular | M | M | + | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 3  |    |    |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | 47 |    |    |

## INTEGUMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE                | 30 MG/KG | DAY ON TEST | ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | * TOTALS |
|--|----------|-------------|-----------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----|----------|
|  |          |             |           | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>3 |   |    |          |
| Mammary Gland                          |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |
| Carcinoma                              |          |             |           |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
| Fibroadenoma                           |          | X           |           | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X                |                  | X | 14 |          |
| Fibroadenoma, Multiple                 |          |             |           |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 4        |
| Skin                                   |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |
| Keratoacanthoma                        |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
| Lipoma                                 |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
|  |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |
| <b>MUSCULOSKELETAL SYSTEM</b>          |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |
| Bone                                   |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |
| Chordoma                               |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
| Skeletal Muscle                        |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
| <b>NERVOUS SYSTEM</b>                  |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |
| Brain                                  |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |
| Carcinoma, Metastatic, Pituitary Gland |          |             |           |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |
| Peripheral Nerve                       |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 2        |
| Spinal Cord                            |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 2        |
| <b>RESPIRATORY SYSTEM</b>              |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |
| Lung                                   |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |
| Alveolar/Bronchiolar Adenoma           |          |             |           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 2        |
| Nose                                   |          | +           | +         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                                | DAY ON TEST     |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |
|--------------------------------|-----------------|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----|
|                                |                 | 0<br>7    | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 |          |    |
| <b>FISCHER 344 RATS FEMALE</b> | <b>30 MG/KG</b> |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
|                                |                 | ANIMAL ID | 0<br>0   |    |
| Trachea                        |                 | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |    |
| <b>SPECIAL SENSES SYSTEM</b>   |                 |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Eye                            |                 | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| Harderian Gland                |                 | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| <b>URINARY SYSTEM</b>          |                 |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Kidney                         |                 | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| Urinary Bladder                |                 | +         | +      | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 49 |
| <b>SYSTEMIC LESIONS</b>        |                 |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Multiple Organ                 |                 | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| Histiocytic Sarcoma            |                 |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2  |
| Leukemia Mononuclear           |                 | X         | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 9  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

**Test Type: CHRONIC**

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## Methyl trans-styryl ketone

CAS Number: 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I., Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                                  |          | DAY ON TEST | 0<br>0<br>1<br>7           | 0<br>3<br>0<br>7<br>6      | 0<br>4<br>9<br>9<br>0      | 0<br>4<br>3<br>3<br>3      | 0<br>5<br>8<br>9<br>7      | 0<br>5<br>9<br>0<br>3      | 0<br>6<br>1<br>2<br>9      | 0<br>6<br>3<br>3<br>9      | 0<br>6<br>5<br>7<br>7      | 0<br>6<br>7<br>7<br>7      | 0<br>6<br>8<br>7<br>7      | 0<br>6<br>9<br>8<br>3      | 0<br>6<br>9<br>7<br>1      | 0<br>7<br>0<br>1<br>6      | 0<br>7<br>1<br>1<br>6      | 0<br>7<br>2<br>4<br>9      |                            |                            |                            |                            |                      |   |  |     |
|----------------------------------|----------|-------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------|---|--|-----|
|                                  |          | ANIMAL ID   | 0<br>0<br>3<br>3<br>6<br>9 | 0<br>0<br>3<br>3<br>5<br>9 | 0<br>0<br>3<br>3<br>8<br>8 | 0<br>0<br>3<br>3<br>8<br>8 | 0<br>0<br>3<br>3<br>6<br>8 | 0<br>0<br>3<br>3<br>5<br>8 | 0<br>0<br>3<br>3<br>6<br>2 | 0<br>0<br>3<br>3<br>5<br>6 | 0<br>0<br>3<br>3<br>7<br>2 | 0<br>0<br>3<br>3<br>9<br>2 | 0<br>0<br>3<br>3<br>8<br>3 | 0<br>0<br>3<br>3<br>8<br>3 | 0<br>0<br>3<br>3<br>8<br>8 | 0<br>0<br>3<br>3<br>9<br>0 | 0<br>0<br>3<br>3<br>9<br>2 | 0<br>0<br>3<br>3<br>9<br>7 | 0<br>0<br>3<br>3<br>9<br>8 | 0<br>0<br>3<br>3<br>9<br>1 | 0<br>0<br>3<br>3<br>9<br>1 | 0<br>0<br>3<br>3<br>9<br>1 | females<br>(cont...) |   |  |     |
| FISCHER 344 RATS FEMALE          | 90 MG/KG |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |
| Stomach, Glandular               |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    |   |  |     |
| Tongue                           |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      | + |  |     |
| Squamous Cell Papilloma          |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      | + |  |     |
| <b>CARDIOVASCULAR SYSTEM</b>     |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |
| Blood Vessel                     |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |
| Heart                            |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| <b>ENDOCRINE SYSTEM</b>          |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |
| Adrenal Cortex                   |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| Adenoma                          |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X   |
| Adrenal Medulla                  |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| Pheochromocytoma Benign          |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X   |
| Islets, Pancreatic               |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | A                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| Adenoma                          |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |
| Parathyroid Gland                |          |             | M                          | M                          | +                          | +                          | +                          | +                          | +                          | +                          | M                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | M                          | +                          | +                          | +                          | +                    | + |  |     |
| Pituitary Gland                  |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| Pars Distalis, Adenoma           |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X   |
| Pars Distalis, Adenoma, Multiple |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X   |
| Pars Distalis, Carcinoma         |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X X |
| Thyroid Gland                    |          |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                    | + |  |     |
| C-cell, Adenoma                  |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  | X   |
| C-cell, Carcinoma                |          |             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                      |   |  |     |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | 90 MG/KG | DAY ON TEST | ANIMAL ID |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | females<br>(cont...) |    |
|-------------------------|----------|-------------|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------|----|
|                         |          |             | 000       | 034 | 044 | 045 | 055 | 055 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 | 066 |                      |    |
|                         |          | 17          | 06        | 07  | 09  | 09  | 03  | 03  | 07  | 09  | 00  | 03  | 03  | 09  | 02  | 06  | 09  | 07  | 07  | 07  | 07  | 07  | 01  | 06  | 06  | 08  | 04                   | 09 |
|                         |          | 09          | 09        | 09  | 05  | 02  | 05  | 08  | 08  | 08  | 02  | 06  | 05  | 02  | 02  | 05  | 02  | 03  | 01  | 03  | 00  | 02  | 07  | 08  | 01  | 01  | 09                   | 01 |

Follicular Cell, Adenoma X

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Clitoral Gland  
Adenoma  
Carcinoma

+ X + + +

Ovary

+ +

Uterus  
Carcinoma  
Polyp Stromal  
Polyp Stromal, Multiple

+ X + X X X

Vagina  
Squamous Cell Papilloma

+ X

## HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

+ +

Lymph Node, Mandibular

M M M M M M M M + M + M

Lymph Node, Mesenteric

+ +

Spleen

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue





TDMS No. 95003 - 05

Test Type: CHRONIC

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## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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| FISCHER 344 RATS FEMALE | 90 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------|----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
|                         |          |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| ANIMAL ID               |          | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |  |
|                         |          | 2           | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |  |
|                         |          | 9           | 9 | 9 | 9 | 9 | 9 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |  |
|                         |          | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
|                         |          | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
|                         |          | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |  |
|                         |          | 5           | 6 | 7 | 7 | 8 | 8 | 7 | 8 | 6 | 7 | 7 | 8 | 9 | 9 | 9 | 9 | 9 | 5 | 5 | 6 | 7 | 7 | 7 | 8 | 9 | 0 |  |
|                         |          | 7           | 0 | 3 | 5 | 4 | 7 | 0 | 6 | 6 | 1 | 4 | 0 | 4 | 7 | 8 | 9 | 3 | 4 | 4 | 6 | 7 | 7 | 8 | 5 | 6 | 0 |  |

\* TOTALS

## ALIMENTARY SYSTEM

|                               |   |    |
|-------------------------------|---|----|
| Esophagus                     | + M + +       | 49 |
| Intestine Large, Cecum        | + | 50 |
| Intestine Large, Colon        | + | 49 |
| Intestine Large, Rectum       | + | 49 |
| Intestine Small, Duodenum     | + | 49 |
| Intestine Small, Ileum        | + | 46 |
| Intestine Small, Jejunum      | + | 46 |
| Liver                         | + | 50 |
| Carcinoma, Metastatic, Uterus |   | 1  |
| Hepatocellular Adenoma        |   | 1  |
| Mesentery                     | +   | 25 |
| Carcinoma, Metastatic, Uterus |   | 1  |
| Pancreas                      | +   | 49 |
| Carcinoma, Metastatic, Uterus |   | 1  |
| Mixed Tumor Benign            | X   | 2  |
| Salivary Glands               | +   | 50 |
| Schwannoma Malignant          |   | 1  |
| Stomach, Forestomach          | +   | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE          | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |
|----------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----|
|                                  |             | 0<br>7 |          |    |
| 90 MG/KG                         | ANIMAL ID   | 2<br>9 |          |    |
|                                  |             | 0<br>0   |    |
| Stomach, Glandular               |             | 0<br>0   |    |
| Tongue                           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 3  |
| Squamous Cell Papilloma          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| <b>CARDIOVASCULAR SYSTEM</b>     |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Blood Vessel                     |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| Heart                            |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| <b>ENDOCRINE SYSTEM</b>          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |    |
| Adrenal Cortex                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| Adenoma                          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2  |
| Adrenal Medulla                  |             | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 49 |
| Pheochromocytoma Benign          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| Islets, Pancreatic               |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 49 |
| Adenoma                          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| Parathyroid Gland                |             | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +        | 44 |
| Pituitary Gland                  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| Pars Distalis, Adenoma           |             | X      | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 23 |
| Pars Distalis, Adenoma, Multiple |             |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |
| Pars Distalis, Carcinoma         |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 4  |
| Thyroid Gland                    |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 |
| C-cell, Adenoma                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 7  |
| C-cell, Carcinoma                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | 90 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |
|-------------------------|----------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
|                         |          |             | 0<br>7 |        |        |
| ANIMAL ID               | 0<br>0   | 0<br>0      | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 |        |        |
|                         |          |             | 3<br>3 | 3<br>4 |        |        |
|                         |          |             | 5<br>7 | 6<br>0 | 7<br>3 | 7<br>5 | 8<br>4 | 8<br>7 | 8<br>0 | 8<br>6 | 8<br>6 | 7<br>1 | 7<br>4 | 7<br>0 | 8<br>4 | 8<br>7 | 8<br>8 | 9<br>9 | 9<br>9 | 9<br>9 | 5<br>3 | 5<br>4 | 6<br>6 | 7<br>7 | 7<br>7 | 8<br>8 | 9<br>9 | 0<br>0 |

\* TOTALS

Follicular Cell, Adenoma

1

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma        |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 9  |
| Carcinoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Ovary | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Uterus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Polyp Stromal           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Polyp Stromal, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

|                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| Vagina                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 10 |
| Squamous Cell Papilloma |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1  |

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 12 |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 3  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 02/22/2010

Time Report Requested: 09:21:31

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE                | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
|  |             | 0<br>7 |          |
| 90 MG/KG                               | ANIMAL ID   | 2<br>9 |          |
|  |             | 0<br>0 |          |
| Thymus                                 |             | 0<br>0   |
| <b>INTEGUMENTARY SYSTEM</b>            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Mammary Gland                          |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 47       |
| Adenoma                                |             |        | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |
| Fibroadenoma                           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Fibroadenoma, Multiple                 |             | X      |        | X      | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 13       |
| Skin                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |
| Fibroma                                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Bone                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |
| Osteosarcoma                           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| <b>NERVOUS SYSTEM</b>                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Brain                                  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |
| Carcinoma, Metastatic, Pituitary Gland |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Peripheral Nerve                       |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Spinal Cord                            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| <b>RESPIRATORY SYSTEM</b>              |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Lung                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |
| Alveolar/Bronchiolar Adenoma           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Nose                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |

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+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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TDMS No. 95003 - 05

**Test Type: CHRONIC**

**Route: SKIN APPLICATION**

**Species/Strain:** RATS/F 344/N

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## Methyl trans-styryl ketone

CAS Number: 1896-62-4

**Date Report Requested:** 02/22/2010

**Time Report Requested:** 09:21:31

**First Dose M/F:** 04/05/04 / 04/05/04

Lab: SRI

\*\*\* END OF REPORT \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X - Lesion present

#### I Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK - Not examined microscopically